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In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

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In the Matter of the Name Change of:

\_\_\_\_\_

Petitioner

**Order Changing Name**

Case Number \_\_\_\_\_

Judge \_\_\_\_\_

Commissioner \_\_\_\_\_

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(1) Petitioner appeared in Court on: \_\_\_\_\_ (date).

(2) Petitioner was born on: \_\_\_\_\_ (date).

(3) The Petitioner's birth name was

First Name \_\_\_\_\_

Middle Name (if any) \_\_\_\_\_

Last Name \_\_\_\_\_

THE COURT FINDS:

(4) (a) All notices required by law have been given.

(b)  No objections to the proposed name change were made.

(c)  Objections to the proposed name change were made by:

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(d)  Other findings (if any):

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THE COURT CONCLUDES:

(5) (a) The requirements of Utah Code Section 42-1-1 through 42-1-3 have been met and Utah Code Section 77-27-21.5(17) does not prohibit this order.

(b) It appears to the satisfaction of the court that the allegations in the petition are true and sufficient and that the petition should be granted.

THE COURT ORDERS:

The Petitioner's current legal name of

First Name \_\_\_\_\_

Middle Name (if any) \_\_\_\_\_

Last Name \_\_\_\_\_

Is changed to

First Name \_\_\_\_\_

Middle Name (if any) \_\_\_\_\_

Last Name \_\_\_\_\_

The Petitioner may use this new legal name from this date forward.

Date \_\_\_\_\_

Sign here ► \_\_\_\_\_

Judge \_\_\_\_\_

### Certificate of Service

I certify that I served a copy of this Order Changing Name on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_